



02/21/2007 13:13 FAX 512 338 6301

Zagorin O'Brien Graham

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Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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22120 7590 12/20/2006

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02/21/2007 AOSHAN2 00000048 10700902

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Nicole Teitler Cave (Depositor's name)
Nicole Teitler Cave (Signature)
2/21/07 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/700,902	11/04/2003	Michael Zhuoying Su	1001-0263	7761

TITLE OF INVENTION: INTERCONNECT SPEED SENSING CIRCUITRY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	03/20/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
DIMYAN, MAGID Y	2825	716-004000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Advanced Micro Devices, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sunnyvale, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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☐ A check is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0631 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Nicole Teitler Cave

Date

2/21/07

Typed or printed name Nicole Teitler Cave

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